Based on the agency's experience of 4 years, FDA estimates there are approximately 200 manufacturers of products subject to the Prescription Drug User Fee Act. Of the 200 manufacturers, CDER estimates 141 are drug manufacturers, and CBER estimates 59 are biologics manufacturers. CDER estimates there are 1,721 annual responses that include the following: 125 new drug applications, 1,098 chemistry supplements, 400 labeling supplements, and 98 efficacy supplements. CBER estimates there are 167 annual responses that include the following: 157 annual product supplements, and 10 original license applications.

Dated: February 9, 1998.

William K. Hubbard,

Associate Commissioner for Policy Coordination.

[FR Doc. 98–3707 Filed 2–12–98; 8:45 am] BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[HCFA-R-170]

Agency Information Collection Activities: Submission for OMB Review; Comment Request

AGENCY: Health Care Financing Administration, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Criteria for Medicare Coverage of Lung Transplants; Form No.: HCFA-R-170 (OMB# 09380670); Use: Medicare participating hospitals must file an application to be approved for coverage and payment of lung transplants performed on Medicare beneficiaries; Frequency: Annually; Affected Public: Business or other forprofit; Number of Respondents: 16; Total Annual Responses: 16; Total Annual Hours: 1,910.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access HCFA's Web Site address at http://www.hcfa.gov/ regs/prdact95.htm, or E-mail your request, including your address, phone number, OMB number, and HCFA document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 30 days of this notice directly to the OMB desk officer: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: February 3, 1998.

John P. Burke III.

HCFA Reports Clearance Officer, HCFA Office of Information Services, Information Technology Investment Management Group, Division of HCFA Enterprise Standards. [FR Doc. 98–3689 Filed 2–12–98; 8:45 am] BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Healthy Start Initiative—Phase II: Limited Competition Within the City of Milwaukee

AGENCY: Health Resources and Services Administration (HRSA), HHS.

ACTION: Notice of availability of funds for a limited competition within the City of Milwaukee.

summary: The HRSA announces the availability funds in fiscal year 1998 for a single cooperative agreement for the replication of the Healthy Start Initiative (HSI) Phase II within the City of Milwaukee. The Healthy Start Initiative is a program of projects which, since FY 1991, has developed and implemented community-based strategies to reduce infant mortality in areas with a high incidence of infant mortality. The purpose of Healthy Start-Phase II is to operationalize successful infant mortality reduction strategies developed

during the demonstration phase and to launch Healthy Start projects in new rural and urban communities (i.e., communities currently without a Healthy Start Initiative-funded project). Within the HRSA, the Healthy Start Initiative is administered by the Maternal and Child Health Bureau (MCHB). This cooperative agreement for Healthy Start-Phase II in the city of Milwaukee will be made under the program authority of Section 301 of the Public Health Service Act. Funds for this award were appropriated under Public Law 104–208.

To continue Healthy Start efforts to meet critical maternal and child health needs within the City of Milwaukee, public and nonprofit private organizations within the City of Milwaukee are encouraged to apply. DATES: The application deadline date is Friday, February 20, 1998.

ADDRESS: Interested parties may contact the HRSA Grants Application Center for an application package. Requests should specify the Healthy Start Initiative— Phase II limited competition within the City of Milwaukee (CFDA #93.926b). The Center may be contacted by: telephone: 1–888–300–HRSA, FAX: 301–309–0579, or e-mail: HRSA.GAC@x.netcom.com. Completed

applications should be returned to: Grants Management Officer (CFDA 193.926b), HRSA Grants Application Center, 40 West Gude Drive, Suite 100, Rockville, Maryland 20850.

Dated: February 9, 1998.

Claude Earl Fox,

Acting Administrator. [FR Doc. 98–3705 Filed 2–12–98; 8:45 am] BILLING CODE 4160–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Practitioner Data Bank; Change in User Fee and Elimination of Diskette Queries

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Withdrawal.

SUMMARY: National Practitioner Data Bank; Change in User Fee and Elimination of Diskette Queries notice, document 98–2637, pages 5811–5812, Volume 63, Number 23, in the issue of Wednesday, February 4, 1998, was published in error and is withdrawn from publication.

The correct version of the notice was published on Thursday, January 29,